

## To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation <b>PEOPLE FOR THE AMERICAN WAY</b>		
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1101 15TH STREET NW SUITE 600		
(c) City, State and ZIP Code WASHINGTON DC 20005		3. FEC Identification Number <div> <div>C</div> <div>C90012071</div> </div>
2. Occupation and Name of Employer (for Individual Filers Only)		

Three digital displays showing the date 10/24/2014 in MM/DD/YYYY format. The first display shows '10' under 'MM', the second shows '24' under 'DD', and the third shows '2014' under 'YYYY'.

Three digital displays showing the date 10/24/2014 in MM/DD/YYYY format. The first display shows '10' under 'MM', the second shows '24' under 'DD', and the third shows '2014' under 'YYYY'.

6. TOTAL CONTRIBUTIONS.....	.00
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7. TOTAL INDEPENDENT EXPENDITURES .....	5000.00
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10/25/2014

FEC Schedule 5 (REV. 09/2013)

**SCHEDULE 5-E**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 2 OF 2  
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

PEOPLE FOR THE AMERICAN WAY

Full Name (Last, First, Middle Initial) of Payee

Bully Pulpit Interactive LLC

Date of Public Distribution/Dissemination

MM / DD / YYYY  
10 / 24 / 2014

Mailing Address

1140 Connecticut Ave., NW

Suite 800

Amount

5000.00

City

State

Zip Code

Washington

DC

20036

Transaction ID : F57.000001

Purpose of Expenditure

Facebook Ads about FedEx packages comment/video

Category/  
Type

004

Office Sought:

☒

House

State: VA

☐

Senate

District: 10

☐

President

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Barbara Comstock

Disbursement For:  
2014☐ Primary☒ General☐ Other (specify) ▶Calendar Year-To-Date Per Election  
for Office Sought

5000.00

Full Name (Last, First, Middle Initial) of Payee

Date of Public Distribution/Dissemination

MM / DD / YYYY

Mailing Address

Amount

City

State

Zip Code

Purpose of Expenditure

Category/  
Type

Office Sought:

☐

House

State: \_\_\_\_\_

☐

Senate

District: \_\_\_\_\_

☐

President

Check One:

☐

Support

☐

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Calendar Year-To-Date Per Election  
for Office SoughtDisbursement For: ☐ Primary☐ General☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Date of Public Distribution/Dissemination

MM / DD / YYYY

Mailing Address

Amount

City

State

Zip Code

Purpose of Expenditure

Category/  
Type

Office Sought:

☐

House

State: \_\_\_\_\_

☐

Senate

District: \_\_\_\_\_

☐

President

Check One:

☐

Support

☐

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Calendar Year-To-Date Per Election  
for Office SoughtDisbursement For: ☐ Primary☐ General☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

5000.00

(b) SUBTOTAL of Unitemized Independent Expenditures .....▶

(c) TOTAL Independent Expenditures.....▶

5000.00

(carry total from last page forward to Line 7)